INDEPENDENT ADOPTION PLACEMENT AGREEMENT TRANSMITTAL

To:				
IN	VESTIGATING PUBLIC ADOPTION AGENCY		DATE	
			eted an Independent Adoption Placement dopt in a county served by your agency.	
SIGNATURE OF AGENCY REPRESENT	TATIVE OR INDIVIDUAL ADOPTION SERVICE PROVIDER		DATE	
SECTION 1 - IDENTIE	YING INFORMATION AND ADVISE	MENT REPORT		
		INICIAL KELOKI		
CHILD PLACED FOR	ADOPTION:	DATE OF BIRTH:	PLACE OF BIRTH:	
TV WIE.		DATE OF BIRTH.	T SIGE OF BIRTH.	
BIRTH PARENTS PLA	ACING CHILD:			
BIRTH MOTHER		BIRTH FATHER		
NAME:		NAME:		
ADDRESS:		ADDRESS:		
TELEPHONE:		TELEPHONE:		
DATE ADVISED:	DATE PLACEMENT AGREEMENT SIGNED:	DATE ADVISED:	DATE PLACEMENT AGREEMENT SIGNED:	
DATE ADVIOLD.	DATE I EAGLIMENT AGREEMENT SIGNED.	DATE ADVIOLD.	DATE I PAGEMENT AGREEMENT GIONED.	
NOTE: If the placeme	ent agreement was signed less than	ten days after the adv	risement, the placement agreement must	
			ent be signed less than ten days after the	
advisement occurred.				
PERSON(S) WITH WI	HOM CHILD PLACED:			
ADOPTING MOTHER'S NAME:		WORK TELEPHONE:		
ADOPTING FATHER'S NAME:		()		
ADOPTING PATHER'S NAME.		WORK TELEPHONE:		
ADDRESS:		HOME TELEPHONE:		
		()		
SECTION 2 - ADOPTI	ON SERVICE PROVIDER:			
NAME:		TELEPHONE:		
		()		
ADDRESS:				

SEC	TION 2 - ADOPTION SERVICE PROVIDER: (Continued)				
	e of Provider:				
туре	Licensed Private California Adoption Agency.				
		License			
	Number: .				
	Adoption agency licensed or otherwise certified in a state other than California where the birth page 1	arent is			
	located - State: (Attach a copy of agency license or certification.)				
	☐ Clinical social worker licensed or certified in a state other than California where the birth pa	rent is			
	located - State:(Attach a copy of license or certification.)	_			
	☐ Independent legal counsel for the birth parent(s) in California - State				
	Number:(Attach explanation of the reason that an adoption service provider values reasonably available as defined in California Family Code Section 8502.	vas not			
	Independent legal counsel for the birth parent(s) in a state other than California where the birth parent	arent is			
	located - State: Bar Number: (Attach of				
	verification of current bar membership. Attach explanation of the reason that an adoption service p				
	was not reasonably available as defined in California Family Code Section 8502.				
SEC	TION 3 - DOCUMENTS ATTACHED:				
	Independent Adoption Placement Agreement				
	Background information regarding the prospective adoptive parents.				
	Reports of any examinations of the birth parent's competency to sign an adoption placement agreement.				
	Documents relating to the determination of the child's status as an Indian child under the Indian Child Welfare Act.				
	Summary of contacts with the birth parent including information from the birth parent(s) regarding the				
	background, the birth parents' reasons for choosing adoption for the child, and the birth parents' attitude tow proposed adoptive placement and any other information which the adoption service provider believes will as investigating agency in its investigation of the proposed adoption. Any request to revoke the Independent Adoption Placement Agreement.				